



Service Priorities and Programmes
Electronic Presentations

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Efficiency improvement project of Nuclear Medicine Service in Queen Mary Hospital

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Introduction

Frontline staffs are facing the problems of shortage of manpower and increase workload.

Objectives

Aims at streamline the workflow in Nuclear Medicine Unit, improving the working conditions for frontline staff and ensure the quality and safety of patient care. 1. Standardized and simplified work process 2. Reshuffled work duties 3. Provided continuous training

Methodology

Proposal based on wide consultation in our unit and other local hospital experience (UCH site visit). All clinical staff anticipated their requirements, to find out what steps could be taken to make the work environment better, the work process more enjoyable and productive. Work reform in three major areas: a) Doctor b) Radiographer c) Supporting staff. Regular meetings are held to listen to feedback from staff at all levels and evaluate the whole project.

Result

The project starts in May 2012 and end in Oct 2012. Doctor's reform: (i) A new, organized doctor duty roster for better use of reporting time for service and training. (ii) Standardized radiopharmaceutical dosage Radiographers: i) Reshuffle of duties: Retrieval of NM exams from patient archive, appointment booking and daily drug ordering by clerical staff. ii) Minimize routine works: Patient information sheet about myocardial perfusion scan, rest thallium scan and bone scan was given to patient upon arrival. This help to reduce the staff for repeat explanation. Patient may asked for a more detailed question on individual basis. iii) Training: Quality assurance session once per month, oversea and local training in Xerleris workstation processing. Supportive staffs: (i) Better define of daily duties (ii) Cancelled unnecessary logbook

entry and limited daily contamination surveillance to clinical area in NM unit (iii) Pick up new duties: Clerical staffs are request to retrieve previous NM exam from archive, appointment booking and RIS daily drug ordering We visited United Christian Hospital nuclear medicine unit. The different in practice was appreciated, our own deficiencies were identified and change accordingly. Conclusions: This efficiency improvement project not only redesign the workflow to allow deployment of staff in areas in need but also improve overall efficiency while maintain high quality patient service.